2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008
Secretary of State

DOCUMENT# N50110

Entity Name: SEAWATCH NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

80 SEAWATCH DR
SEAGROVE BCH, FL 32459

New Principal Place of Business:

Current Mailing Address:

80 SEAWATCH DR
SEAGROVE BCH, FL 32459

New Mailing Address:

FEI Number: 59-3131811 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WRIGHT, WILLIAM E
80 SEA WATCH DR
SEAGROVE BEACH, FL 32459 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	ST	( ) Delete
Name:	PATERSON, CHARLES B	
Address:	2611 FERNWAY DR	
City-St-Zip:	MONTGOMERY, AL 36111	
Title:	D	( ) Delete
Name:	PATERSON, EVELYN A	
Address:	2611 FERNWAY DRIVE	
City-St-Zip:	MONTGOMERY, AL 36111	
Title:	D	( ) Delete
Name:	WRIGHT, WILLIAM E.,	
Address:	80 SEAWATCH DR	
City-St-Zip:	SEAGROVE BEACH, FL 32459	
Title:	P	( ) Delete
Name:	CROMMELIN, HARRIETT	
Address:	44 SEAWATCH DR	
City-St-Zip:	SEAGROVE BEACH, FL 32459	
Title:	V	( ) Delete
Name:	CAMERON, ANTHONY R	
Address:	2921 SEQUOYAH DR	
City-St-Zip:	ATLANTA, GA 30327	
Title:	D	( ) Delete
Name:	FRAZER, NIM	
Address:	628 THORN PLACE	
City-St-Zip:	MONTGOMERY, AL 36106	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES B PATERSON ST 01/09/2008

Electronic Signature of Signing Officer or Director — Date